Customer No. 24113 Patterson, Thuente, Skaar & Christensen, P.A. 4800 IDS Center 80 South 8th Street Minneapolis, Minnesota 55402-2100

Telephone: (612) 349-5740 Facsimile: (612) 349-9266

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 CFR § 1.114 of Application No. 10/756,817, filed January 13, 2004, for: METHODS AND APPARATUS FOR FEMORAL AND TIBIAL RESECTION, by: Timothy G. Haines.

1.	Submission required under 37 CFR § 1.114								
	a.	[]	Previously submitted						
			Please enter in the present application the unentered Amendment under						
			37 CFR § 1.116, with any attachments, filed on in said prior						
			application.						
			Consider the arguments in the Appeal Brief or reply Brief previously						
			filed on						
			[] Other						
			•						
	b.	[X]	Enclosed						
			[X] A Preliminary Amendment is enclosed. Claims added by this						
			Amendment are properly numbered consecutively beginning with the						
			number next following the highest numbered claim in the prior						
			application.						
			[] Affidavit(s)/Declaration(s)						
			[X] Information Disclosure Statement (IDS)						
			[] Added Inventor's Statement						
			[] Consent Of Assignee To Change In Inventorship						

2. The filing fee is calculated below: [X]

	Claims	Highest						
	Remaining	No.	Present					
	After	Previously	Extra	Small		1	Large	
	Amendment	Paid For	(Equals)	Entity Rate	Fee	OR	Entity Rate	Fee
Total	54	- [54]	= 0	x 25	\$0		x 50	\$
Indep.	12	-[17]	= 0	x 100	\$0		x 200	\$
RCE fee				+ 395	\$395		+ 790	\$
Mult. Dep.			=	+ 180	\$		+ 360	\$
	<u></u>			TOTAL	\$395	OR	TOTAL	\$

^[] First Presentation of Multiple Dependent Claim [MDC]

If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

^{***}

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

3. [X] You are authorized to deduct the amount of \$395 from our Deposit Account 16-0631 (The RCE fee under 37 CFR § 1.17(e) is required by 37 CFR § 1.114 when the RCE is filed). The Commissioner is hereby authorized to grant any extensions of time and to charge any fees under 37 CFR §§ 1.16 and 1.17 that may be required during the entire pendency of this application to Deposit Account No. 16-0631.

Respectfully submitted,

Brad Pedersen
Registration No. 32,432

Please grant any extension of time necessary for entry; charge any fee due to Deposit Account No. 16-0631.

CERTIFICATE OF ELECTRONIC FILING

I hereby certify that this paper is being transmitted	electronically to the U.S. Patent and	Frademark Office Electronic Filing
Website on the date shown below.		
Set 25, 2007		~
Date	Brad Pedersen	